

Application Data Sheet

Application Information

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of Copies of CDs::	0
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD AND DEVICE FOR GRAPHICAL INTERFACING
Attorney Docket Number::	0518-1092-1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	5
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN
Middle Name:: FRANCOIS
Family Name:: BILLIARD
Name Suffix::
City of Residence:: NICE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS
Address:: D'INVENTION ET DE MARQUES
CABINET HAUTIER
24 RUE MASSENA
City of Mailing Address:: NICE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERTRAND
Middle Name::
Family Name:: LAPORTE
Name Suffix::
City of Residence:: NICE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS

Address:: D'INVENTION ET DE MARQUES
CABINET HAUTIER
24 RUE MASSENA

City of Mailing Address:: NICE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: PASCALE
Middle Name::
Family Name:: CARON
Name Suffix::
City of Residence:: NICE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS
Address:: D'INVENTION ET DE MARQUES
CABINET HAUTIER
24 RUE MASSENA

City of Mailing Address:: NICE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JÉRÔME
Middle Name::
Family Name:: PETIT

Name Suffix::
City of Residence:: NICE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS
Address:: D'INVENTION ET DE MARQUES
CABINET HAUTIER
24 RUE MASSENA
City of Mailing Address:: NICE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: RICHARD
Middle Name::
Family Name:: MOLENAAR
Name Suffix::
City of Residence:: NICE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS
Address:: D'INVENTION ET DE MARQUES
CABINET HAUTIER
24 RUE MASSENA
City of Mailing Address:: NICE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-06000

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/051276	6/28/04
This application	Prov.An application claiming the benefit under 35 USC 119(e)	60/486.174	7/11/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
EUROPE	03014928.0	7/1/03	Yes

Assignment Information

Assignee Name:: AMADEUS S.A.S.
Street of Mailing 485 ROUTE DU PIN MONTARD
Address:: SOPHIA ANTIPOLIS

City of Mailing Address:: BIOT
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 06410